

**Register by August 18<sup>th</sup> and Save \$10**



**ACCESS SUPPORT IS HERE FOR THE ASKING**

Fairfax County is committed to giving all citizens equal access to recreation and leisure opportunities. In keeping with that policy and the Americans with Disabilities Act, reasonable accommodations and inclusion opportunities are provided to individuals with disabilities in all Park Authority programs, camps and classes. ADA accommodations include sign interpreters, assistive listening devices, program modifications and inclusion support. Call 703/324-8563 or TTY 703/803-3354 at least ten (10) working days in advance of the date services are needed.

**SCOUT REGISTRATION FORM, PAGE 147**



**Fall 2006 Registration Form**

**Parktakes subscribers:** member number, name and subscription expiration date appear on mailing label.  
**Non-subscribers:** a member number will be assigned when registration is processed.

**Phone: 703-222-4664 (live); 703-449-8639 (automated)**

**Fax: 703-631-2004**

**Mail: FCPA/Parktakes, PO Box 4606, Fairfax, VA 22038-4606**

**MAIL/FAX PROCESSING BEGINS AT 9AM DAILY STARTING AUGUST 8**

*Please print all entries*

Member Number: \_\_\_\_\_ Primary Member (must be adult): \_\_\_\_\_

( ☐ Check if change of address ) Street: \_\_\_\_\_ Apt: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ / \_\_\_\_\_ Other Phone: \_\_\_\_\_ / \_\_\_\_\_ E-mail: \_\_\_\_\_

☐ I want to donate to the Class Scholarship Fund that provides low-income families, children, disabled individuals and seniors with the opportunity to take classes. I've added my donation to my total fee.

Please see *Gardening* (pg. 101), *History* (pg. 115), *Nature* (pg. 131) and *Scouts* (pg. 146) sections for instructions on how to register for those programs

Participant's Name (Last, First)	Date of Birth Month/Day/Year	Sex M/F	1ST CHOICE Program Code			Program Name/Location	Start Date	Start Time	Listed Fee	2ND CHOICE Program Code		
Sample, Joey	2 / 07 / 02	M	423	415	0414	Baby & Mc/Oak Mann	3/29	9:10	\$56	423	415	0417
	/ /											
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**Payment Instructions**

1	<b>Total Listed Fee(s):</b> For all 1st choice programs		
2	<b>Early Registration Discount Per Class:</b> Deduct \$10 for each 10-digit program code submitted (postmarked if mailed) by August 18. Does not apply to programs without 10-digit codes or "Re-advertised Tours"	—	
3	<b>SUBTOTAL</b> Line 1 minus Line 2	=	
4	<b>Fairfax County Senior Discount (10-digit coded classes only):</b> Multiply line 3 by 0.45 to calculate 45% Senior Discount. Do NOT round off cents. Write result in line 4. Only residents of Fairfax County and Fairfax City, who turned 60 by Dec. 31, 2005, are eligible. Please note that Senior discounts do not apply to trips/tours, Pilates lessons or classes offered with Inova Health Source.	Line 3 x 0.45 = Seniors only	
5	<b>SUBTOTAL</b> Line 3 minus Line 4	=	
6	<b>Deduct Credits:</b> Deduct any credits received on this line	—	
7	<b>Out-of-County Registration Fee:</b> Add \$10 per 10-digit coded program for non-residents.	+	
8	<b>Donation to Class Scholarship:</b> Add any amount you wish to donate to this program. Thank You!	+	
9	<b>TOTAL (Pay This Amount):</b> Total lines 5-8. Pay this amount. Make checks payable to FCPA. A \$25 fee will be charged for returned checks.	=	

**Scholarship requested:** (Check one. See Scholarship on page 159 for information)

☐ Income Eligible Senior or Income Eligible Disabled Person ☐ Public Assistance Recipient (attach verification)

Signature: \_\_\_\_\_

**Refund Policy Statement**

**Classes**

- An individual request for a refund is defined as a withdrawal from the program.
- FCPA will issue a full refund when a class or program is cancelled by FCPA.
- FCPA will issue a full refund when a class or program is changed by FCPA, and the change makes it impossible for the customer to continue with the class.
- Customers may withdraw from a class at any point; however, refunds will be prorated based on the number of classes that have passed as of the date the request is received.
- Requests for refunds must be submitted prior to the end of the session.
- Refunds or class credits are not issued for personal schedule conflicts or for personal convenience.

**Camps** - See page 159 for Camp refund policy.

**Trips and Tours**- See page 159 for Day Trips and Tours refund policy.

**Payment Method (Check One):**

☐ **Credit Card** (check type): ☐ ☐ Exp. Date: \_\_\_\_ / \_\_\_\_

#: \_\_\_\_\_

Signature \_\_\_\_\_  
I agree to pay above total amount according to card issuer agreement

☐ **Cash** (walk-in only) ☐ **Check enclosed** \$ \_\_\_\_\_ #: \_\_\_\_\_

One household per registration form, please. Additional registration forms may be photocopied or downloaded from the Park Authority's web page, [www.fairfaxcounty.gov/parks](http://www.fairfaxcounty.gov/parks).

**REGISTRATION STARTS AUGUST 8**

**Parktakes**

**FREE Subscriptions to Parktakes, call 703-222-4664**